McHENRY COUNTY

LOAN FUND

APPLICATION

McHENRY COUNTY LOAN FUND INFORMATION

McHenry County has a Loan Fund for the purpose of encouraging economic growth and increasing the size of its commercial and industrial base. The McHenry County Loan Fund (MCLF) is a government funded program that helps build business in McHenry County. The MCLF is administered by the McHenry County Board and marketed by the McHenry County Economic Development Corporation.

Funds can be used for a wide variety of purposes including site development and infrastructure costs, building expansion or renovation, leasehold improvements, moving cost or the purchase of new or used machinery or equipment. To qualify to apply to the Loan Fund an applicant must conduct business operations in McHenry County, or as part of the Loan Fund application, will be locating or relocating business operation to McHenry County. Projects of a speculative nature are not eligible for funding.

McHenry County business will find that the MCLF is an affordable source of financing that can be used with or in place of a traditional commercial or SBA loan. Advantages include:

- Low-cost source of financing
- Long Term Maturity
- Quick response time
- Minimal upfront costs
- Lower costs than SBA loans.

Any new or expanding business located in McHenry County is eligible to apply for this low-cost loan and must meet the following criteria:

- A. The maximum loan amount shall be \$200,000 or 45% of the total project costs, whichever is greater.
- B. All loans must be secured with collateral deemed adequate to support the debt.
- C. Loans are amortized with monthly payments to a maximum maturity of 7 years. Payments begin approximately 30 days after closing the loan.
- D. Interest rates are determined by the County Board are tied to the yield for U.S. Treasury Securities. The interest rate is determined at the time loan documentation is prepared. The present rate schedule is as follows:

| MATURITY | INTEREST RATE |
|----------|--|
| 3 Years | 3 yr. Treasury yield + 100 basis points (b.p.) |
| 4 Years | 4 yr. Treasury yield + 125 b.p. |
| 5 Years | 5 yr. Treasury yield + 150 b.p. |
| 6 Years | 6 yr. Treasury yield + 175 b.p. |
| 7 Years | 7 yr. Treasury yield + 200 b.p. |

- E. There is a \$100.00 non-refundable application fee.
- F. The borrower will reimburse the county for any expenses incurred in filing its lien, documenting the loan, or other related lending costs.

The approval process takes approximately two weeks from the receipt of a fully completed application. Funding is subject to the availability of funds and applicants are served on a first come, first served basis. Approval is based on the company's ability to repay the loan.

For further information contact: McHenry County Department of Administration 815.334.4041, 2200 North Seminary Avenue, Woodstock, IL 60098.

McHENRY COUNTY LOAN FUND APPLICATION

| DATE OF REQUEST: | TOTAL PROJECT COST: |
|--|---|
| APPLICATION FEE: \$100.00 (non-refundable) | AMOUNT OF LOAN REQUEST: |
| NAME OF BUSINESS: | |
| CHIEF EXECUTIVE OFFICER: | |
| BUSINESS ADDRESS: | |
| CITY, STATE & ZIP: | |
| TELEPHONE #: | FAX #: EMAIL: |
| FEIN #: | SIC PRODUCT CODE #: |
| DATE OF INCORPORATION: | DATE STARTED: |
| NAME OF BUSINESS = Please use legal nam FEIN # = Federal Employer Identification Nun SIC Code = Standard Industrial Classification (| |
| | L OWNERS HAVING 20% OR GREATER INTEREST |
| | TO COMPLETE A PERSONAL FINANCIAL STATEMENT |
| NAME: | |
| ADDRESS: | |
| CITY, STATE & ZIP CODE: | |
| DAYTIME TELEPHONE: | FAX #: EMAIL: |
| SOCIAL SECURITY NUMBER: | |
| NAME: | |
| ADDRESS: | |
| | |
| | _FAX #: EMAIL: |
| | |
| I/we authorize the McHenry County Department the statements made herein and to determine m | ent of Administration to make all inquiries deemed necessary to verify the accuracy only/our credit worthiness. |
| I/we certify the above and the statements contacondition as of the date stated above. | ained in the schedules herein are a true and accurate statement of my/our financial |
| Signature | Signature |
| _ | |

| BUSINESS INFOR | MATION: | | | |
|--|--|--|---|-----------------------------------|
| ORGANIZATION: | | | | |
| Sole Proprietorsh | p | Franchise | Partnership | |
| Subchapter "S" C | orporation | Public or Priva | te Corporation | Other |
| ☐ WBE/MBE/DBE | (if applicable) |) | | |
| EMPLOYMENT: | | | | |
| Full Time Employees | : Part Ti | me Employees: | Owners: Tota | al Employees: |
| ANTICIPATED JOB | CREATION: | Full time: | Part Time: | |
| SOURCE OF FUNI | | | | roject es a nn licable |
| | | | | |
| 0 0/ | ¢ D1 | 0/2 \$ MCII | E· 0/6 \$ | Other % |
| Owner:% | _\$ Bank: | \$ NICLI | νΦ | other |
| Owner:% | | | | |
| | NK (If applicab | le): You will need to submit | a fully documented letter of | f commitment from your |
| PARTICIPATING BA | ANK (If applicab | ole): You will need to submit | a fully documented letter of | f commitment from your |
| PARTICIPATING BANK: | NK (If applicab | ole): You will need to submit | a fully documented letter of | f commitment from your |
| PARTICIPATING BANK:LOAN OFFICER: | NK (If applicab | ole): You will need to submit | a fully documented letter of | f commitment from your |
| PARTICIPATING BANK: NAME OF BANK: LOAN OFFICER: ADDRESS: | NK (If applicab | ole): You will need to submit | a fully documented letter of | f commitment from your |
| PARTICIPATING BANK: NAME OF BANK: LOAN OFFICER: ADDRESS: CITY, STATE & ZIP: | NK (If applicab | ole): You will need to submit | a fully documented letter of | f commitment from your |
| PARTICIPATING BANK: NAME OF BANK: LOAN OFFICER: ADDRESS: CITY, STATE & ZIP: TELEPHONE #: | ANK (If applicab | ole): You will need to submit | a fully documented letter of | f commitment from your |
| PARTICIPATING BANK: LOAN OFFICER: ADDRESS: CITY, STATE & ZIP: TELEPHONE #: DURATION OF BANK LO SPECIAL CONDITIONS: PERSONAL FINAN | ANK (If applicab | FAX #: | a fully documented letter of | f commitment from your |
| PARTICIPATING BANK: LOAN OFFICER: ADDRESS: CITY, STATE & ZIP: TELEPHONE #: DURATION OF BANK LO SPECIAL CONDITIONS: PERSONAL FINAN Please provide the appropria | ANK (If applicabed) AN: CIAL STAT te designation (Che) reported by each propriet on by each proportion b | FAX #: FEMENT: Hoose one or more) The proprietor | As of with 20% or more ownersh | f commitment from your |
| PARTICIPATING BANK: LOAN OFFICER: ADDRESS: CITY, STATE & ZIP: TELEPHONE #: DURATION OF BANK LO SPECIAL CONDITIONS: PERSONAL FINAN Please provide the appropria | ANK (If applicabed) AN: CIAL STAT te designation (Che) reported by each propriation by each proportion b | FAX #: FAX proprietor partner officer and each stockholder tity providing a guaranty on | As of with 20% or more ownersh the loan | f commitment from your |

| COMPANY NAME: | |
|----------------|--|
| CUNIPANY NAME: | |

LIABILITIES

| Cash on hand and in banks | \$ Accounts payable | \$ | | |
|-------------------------------|-----------------------------|----|--|--|
| Savings accounts | Notes payable | | | |
| IRA | Installment account (Auto) | | | |
| | Mo. payments \$ | | | |
| Accounts and notes receivable | Installment account (Other) | | | |
| | Mo. payments \$ | | | |
| Life insurance-cash | | | | |
| Surrender value only | Mortgages on real estate | | | |
| Stocks and bonds | Unpaid taxes | | | |
| Real estate | Other liabilities | | | |
| Automobile - present value | | | | |
| Other personal property | Total liabilities | | | |
| Other assets | Net worth | | | |
| Total | \$ Total | \$ | | |

SOURCE OF INCOME

CONTINGENT LIABILITIES

| Salary | \$ As endorser or co-maker \$ | | |
|--------------------------|----------------------------------|--|--|
| Net investment income | Legal claims & judgments | | |
| Real investment income | Provision for federal income tax | | |
| Other income (describe)* | Other special debt | | |
| | (Describe) | | |
| | | | |
| | | | |
| | | | |

^{(*}Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.)

NOTES PAYABLE TO BANKS AND OTHERS

| Name and address of note holder | Original | Current | Payment | Terms | How secured or |
|---------------------------------|----------|---------|---------|-----------|------------------|
| | balance | balance | amount | (monthly, | endorsed type of |
| | | | | etc.) | collateral |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

STOCKS AND BONDS: (Use separate sheet if necessary.)

| Number of | Name of securities | Cost | Market value | Date and amount |
|-----------|--------------------|------|--------------------|-----------------|
| shares | | | quotation/exchange | |
| | | | | |
| | | | | |
| | | | | |

REAL ESTATE OWNED: (List each parcel separately - Use supplemental sheets if necessary - identify and sign each sheet.)

| Address-type of property | Title is in name of: | Date purchased | Original Cost | Present Value | Mortgage Balance | Amount of payment | Status of mortgage |
|--------------------------|----------------------|----------------|------------------|------------------|---------------------|-------------------|--------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

LIST ALL CREDIT REFERENCES: (Including credit cards i.e. Visa, Master Card).

| FIRM NAME | ACCOUNT NUMBER | BALANCE DUE | ACCOUNT/LOAN IN THE NAME OF |
|--------------|----------------|----------------|--------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| Have you had an | y outstanding judgme | nts (last 7 years) or bee | n declared bankrupt, | had a foreclosure of | f property or been evicted? |
|-----------------|----------------------|---------------------------|----------------------|----------------------|-----------------------------|
| Vac | No | | | | |

| BANK ACCOUNTS: (Additional infor | mation may be attached.) |
|--|---|
| NAME OF BANK: | |
| CITY, STATE & ZIP: | |
| ACCOUNT IN THE NAME OF: | |
| TYPE OF ACCOUNT: | ACCOUNT NUMBER: |
| NAME OF BANK: | |
| CITY, STATE & ZIP: | |
| ACCOUNT IN THE NAME OF: | |
| TYPE OF ACCOUNT: | ACCOUNT NUMBER: |
| NAME OF BANK: | _ |
| CITY, STATE & ZIP: | |
| ACCOUNT IN THE NAME OF: | |
| TYPE OF ACCOUNT: | ACCOUNT NUMBER: |
| | |
| | |
| OTHER ASSETS, NOTES AND ACCO | UNTS RECEIVABLE: (Describe) |
| | |
| | |
| UNPAID TAXES: (Describe in detail, type) | pe, to whom payable, when due, amount and what, if any, property the tax lien |
| attaches.) | |
| | |
| | |
| OTHER LIABILITIES: (Describe in det | ail) |
| | |
| | |
| LIFE INSURANCE HELD: (Give face a | amount of policies, name of company and beneficiaries.) |
| . (| 1 2 |
| | |

| COMPA | NY NAME: | |
|-------|-----------|--|
| COMP | ANT NAME: | |

| ADDRESS: | | CITY AND STA | TE AND ZIP: | |
|------------|--------------|--|-------------------------|--|
| TELEPHONE: | | POSITION HEL | POSITION HELD: | |
| | | REASON FOR LEAVING: | | |
| | | | | |
| ADDRESS: | | CITY AND STA | CITY AND STATE AND ZIP: | |
| TELEPHONE: | | POSITION HEL | POSITION HELD: | |
| TO: | FROM: | REASON FOR LEAVING: | | |
| TO: | FROM: | REASON FOR LEAVING: | | |
| 10: | FKUNI: | REASON FOR LEAVING: | | |
| RESIDE | NCE HISTORY: | : (Please provide previous address/s to cove | r past seven (7) years: | |
| | Address | City | Length of Residence | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Please use the attached checklist to expedite your application.

-5-<u>APPLICATION CHECKLIST</u>

| MACHINERY AND EQUIPME | NT: Describe major | equipment or classes of equipment to be acquired with loan funds. |
|--|--|--|
| ☐ New machinery/equipment – Supp | ly vender cost estimate | es. Amount: |
| Used machinery/equipment – Proving market value is in line with the | | |
| LAND AND BUILDING INFOR | MATION: Descri | be the land/building to be acquired with loan funds. |
| ☐ An appraisal by a certified appraise | er | Appraised value |
| ☐ Purchase option or agreement | | Contractor/Architect's cost estimate |
| Rental/Lease agreement | | |
| ☐ Environmental impact study – land | purchase | |
| Location Map | | |
| □Survey | | |
| INVENTORY: Describe invento | ry to be acquired wi | th loan funds. |
| ☐ New: inventory vendor cost estima | ates | Amount: |
| ☐ Used: appraisal demonstrating fair | market value | Appraised value: |
| FINANCIAL INFORMATION: Current balance sheet and operation | n statement no older th | nan 90 days |
| ☐ Three year historical financial states Balance sheet - Profit and Loss State ☐ Prior three (3) year tax statements | | 's independent accountant. Additional financial statements may be required on of equity or |
| Projected earnings report – Three (| 3) year projected balar | nce sheet and Profit and Loss Statement |
| Collateral/Security pledges for loar | funds | |
| One (1) year monthly projected case | h flow statement | |
| Are there or will there by any other | liens on the collateral | : Yes No If yes, describe: |
| FOR SOLE PROPRIETORSHIP: | ☐Operating license ☐ Resume of comp | |
| FOR CORPORATIONS: | Articles and certi | ficates of incorporation e by-laws |
| FOR PARTNERSHIPS: | ☐ Certificate of Par ☐ Partnership Agre ☐ Certificate of Goo | |
| FOR FRANCHISE: | ☐ Franchise agreen☐ Franchiser's finar☐ Franchise disclos | icial statement |
| OTHER ITEMS: | ☐ Bank commitmen☐ Equity contribution | |
| | GUAGE INDICATING | OCUMENTED IN COMMITMENT LETTERS, LOANS FROM FINANCIAL G THE LOAN AMOUNT, SPECIFIC TERM AND INTEREST, COLLATERAI |
| EQUITY CONTRIBUTION OR LOA | NS BY OWNER(S) N | MUST BE DOCUMENTED THROUGH SIGNED LETTERS FROM THE |

☐ Insurance Certificate showing McHenry County as Loss Payee